Practitioner's Docket No. 06-479	PATENT
COMBINED DECLARATION ANI	POWER OF ATTORNEY
(ORIGINAL, DESIGN, NATIONAL STAGE OF P CONTINUATION, O	
As a below named inventor, I hereby declare that:	Mandre
TYPE OF DECLA	RATION
This declaration is of the following type: ☐ original. (check one) ☐ design. ☐ supplemental. ☐ national stage of ☐ divisional. ☐ continuation. ☐ continuation-in-p	
INVENTORSHIP IDEN	TIFICATION
My residence, post office address and citizenship are as stated original, first and sole inventor (if only one name is listed belonames are listed below) of the subject matter that is claimed, a entitled:	w) or an original, first and joint inventor (if plural
TITLE OF INVE	NTION
REFRIGERATING SYSTEM AND MI REFRIGERATING	
SPECIFICATION IDEN	TIFICATION
the specification of which:	
(a) is attached hereto.	
(b) ⊠ was filed on August 9, 2006, as Serial No. 10/589,091 a (if applicable).	and was amended on

(c) was described and claimed in PCT International Application No. PCT/EP05/01092, filed on February 3, 2005 and as amended under PCT Article 19 on applicable).

SUPPLEMENTAL DECLARATION (37 C.F.R. § 1.67(b))

(complete the following where a supplemental declaration is being submitted)

☐ I hereby declare that the subject matter of the	
☐ attached amendment	
☐ amendment filed on	_

was part of my/our invention and was invented before the filing date of the original application, above-identified, or such invention.

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and

in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 C.F.R. § 1.98.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, §§ 119(a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed. Such applications have been filed as follows:

PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119(a)-(d)

COUNTRY (OR		DATE OF FILING	PRIORITY CLAIMED
INDICATE IF PCT)	APPLICATION NO.	(day, month, year)	UNDER 35 USC 119
Germany	10 2004 006 271.4	February 9, 2004	YES
			YES/NO

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

PROVISIONAL APPLICATION NO.	FILING DATE (day, month, year)

CLAIM FOR BENEFIT OF EARLIER US/PCT APPLICATION(S) UNDER 35 U.S.C. § 120

☐ The claim for the benefit of any such applications are set forth in the attached ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CONTINUATION-IN-PART (C-I-P) APPLICATION.

ALL FOR	REIGN A	PPLICA	TION(S),	IF ANY	, FILED	MORE	THAN:	12 MON'	ГHS
(6	MONTH	IS FOR I	DESIGN)	PRIOR	TO THIS	U.S. AI	PPLICA	TION	

POWER OF ATTORNEY

I hereby appoint the practitioners practicing at the following Customer Number to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

34704

SEND CORRESPONDENCE TO:

DIRECT TELEPHONE CALLS TO:

The above Customer Number.

Barry L. Kelmachter (203) 777-6628 - ext. 112

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or

imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full name of sole or first inventor:	Full name of second joint inventor, if any:
(signature)	(signature)
Name: Uwe Schierhorn	Name:
Date: X 6, 9, 06	Date:
Country of Citizenship: Germany	Country of Citizenship:
Residence Address:	Residence Address:
Überlinger Str. 11 50389 Wesseling Germany	
Post Office Address: (SAME AS ABOVE)	Post Office Address: (SAME AS ABOVE)

THIS DECLARATION ENDS WITH THIS PAGE.